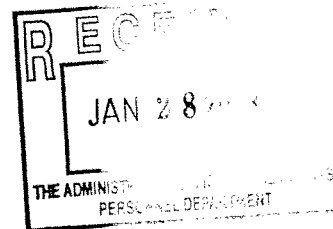


FILED
JAN 28 2008



JUDICIAL FINANCIAL DISCLOSURE STATEMENT FOR YEAR ENDING
DECEMBER 31, 20 07

RECEIVED

JAN 31 2008

COMMISSION
ON ETHICS

GENERAL INFORMATION

1. Name WILLIAM D. KEPHART
2. Title CHIEF DEPUTY DISTRICT ATTORNEY
3. Mailing address 2877 THURMAN AVE.
LAS VEGAS, NEVADA 89120
4. Length of residence in Nevada 46 years
5. County in which you are registered to vote CLARK
6. Length of residence in the county in which you are registered to vote 46 years

COMPENSATION FOR EXTRA-JUDICIAL ACTIVITIES

7. Disclose the date, place, and nature of any extra-judicial activity for which you received compensation, the name of the payor, and the amount of the compensation so received. See Canon 4I(2)(a)(ii). Attach additional sheets if necessary.

Date	Nature and Place of Activity	Name of Payor	Amount
	"NONE"		

INCOME

8. Disclose each source of income received by you and by each member of your household who is 18 years of age or older. No listing of individual clients, customers, or patients is required. Income received from such sources should be disclosed under a general heading such as "professional services." See Canon 4I(2)(a)(iii). Attach additional sheets if necessary.

Source of Income	Recipient
CLARK CO. DISTRICT ATTY.	WILLIAM D. KEPHART
PARK ANIMAL HOSPITAL	TINA KEPHART
CLARK CO DISTRICT ATTY.	MATTHEW KEPHART

REAL PROPERTY

9. Disclose the specific location, nature, and particular use of any real estate which has a fair market value of \$2,500 or more, other than your personal residence, in which you or a member of your household has a legal or beneficial interest, and is located in Nevada or any adjacent state. See Canon 4I(2)(a)(iv). Specific addresses are required – list the street address or legal description. You must designate whether the property is unimproved vacant land, agricultural land, commercial building, apartments, single-family, rental, etc. Attach additional sheets if necessary.

<i>Specific Location</i>	<i>Nature/Particular Use</i>	<i>Interest Holder</i>
SIERRA VERDE RANCH PARCEL# 301-18-177 LOT#198	CASIN	N/A

CREDITORS

10. Disclose the name of each creditor to whom you or a member of your household owes \$5,000 or more unless: (a) the debt is secured by a mortgage or deed of trust on real property which is not required to be listed under question 9 above, or (b) the debt is one for which a security interest in a motor vehicle for personal use was retained by the seller or its assignee or designee. See Canon 4I(2)(a)(v). Attach additional sheets if necessary.

<i>Name of Creditor</i>	<i>Name of Debtor</i>
DISCOVER CARD	WILLIAM D. KEPHART
BANK OF AMERICA	WILLIAM D. KEPHART
COUNTRYWIDE CREDIT CARD	WILLIAM D. KEPHART

BUSINESS ENTITIES

11. List each business entity in which you or a member of your household is involved as a trustee, beneficiary of a trust, director, officer, owner (in whole or in part), limited or general partner, or holder of any class of stock or security representing one percent or more of the total outstanding stock or securities issued by the business entity. See Canon 4I(2)(a)(vi). Attach additional sheets if necessary.

<i>Business Entity</i>	<i>Nature of Involvement</i>	<i>Person Involved</i>
	"NONE"	

GIFTS, BEQUESTS, FAVORS, OR LOANS

12. Disclose the date, place, name of the donor, amount, and nature of any gift, bequest, favor or loan to you or to a member of your family residing in your household if its value exceeded \$200, unless this disclosure is not required by Section 4D of the Code of Judicial Conduct. *See especially Canon 4D(5)(h) and 4I(2)(a)(vii).* Attach additional sheets if necessary.

Date	Name and Place of Gift	Name of Donor	Amount
	"NONE"		

I HEREBY CERTIFY THAT THE INFORMATION CONTAINED IN THIS DOCUMENT IS TRUE AND COMPLETE.

1-24-08
Date

Wilb Kyrst
Signature

File this form with the State Court Administrator.

Deliver or mail to:

State Court Administrator
Administrative Office of the Courts
201 S. Carson Street, Suite 250
Carson City, Nevada 89701-4702

Telephone: (775) 684-1700